IN THE U.S. PATENT AND TRADEMARK OFFICE

DECLARATION AND POWER OF ATTORNEY

ATT. DOCKET NO.

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name,

I believe I am an original, first, and sole (or joint) inventor of the subject matter that is claimed and for which a patent is sought on the invention entitled A method of fabricating a zirconium alloy flat product, a product as obtained thereby, and a fuel assembly element for a power station nuclear reactor made from said flat product_______ the specification of which was filed as U.S. Serial No. ______ on ______, 2005; and was filed as International Application Serial No. PCT/FR04/01923_ on 20.07.04___. I hereby authorize and request my appointed attorneys listed below, to insert above the filing date and application number of said application when known.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate filed by me on the same subject matter having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

Number	Country	Day/month/year	Priority Claimed	1
0309474	FRANCE	31.07.2003	Yes_X	No_

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys:

Richard L. Mayer (Reg. No. 22,490) Patrick J. Birde (Reg. No. 29,770) Jeffrey M. Butler (Reg. No. 41,652) John M. Vereb (Reg. No. 48,912)

SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

CUSTOMER NO. 26,646

KENYON & KENYON One Broadway New York, NY 10004 (212) 425-7200 (phone) (212) 425-5288 (facsimile) I declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
	BARBERIS	Pierre		
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	UGINE	FRANCE	FRANCE	
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
	309, chemin des Cèdres	UGINE	FRANCE 73400	
Signature	3-	Date	13.12.2005	

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	SIMONOT	Claude	
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	L'AIGLE	FRANCE	FRANCE
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	41, rue St Barthelemy	L'AIGLE	FRANCE 61300
Signature Signature		Date 13.12.2005	